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DE		First Named Inventor		Straub					
PATENT APPLICATION			COMPLETE IF KNOWN						
(37 CI	f	Application	Number						
Declaration Submitted OR With Initial	Declara	tion	Filing Date						
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Filing	(37 ČFR 1.16 (e)) required)		Examiner Name						
I hereby declare that:									
Each inventor's residence, m	ailing address, a	ınd citizenship are a	as stated be	elow next to t	heir name.				
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for									
which a patent is sought on the	ne invention enti	idea:							
DEVICE AND METHOD FOR FINANCIAL SERVICES CONTACTHMANAGEMENT									
							·		
(Title of the Invention) the specification of which									
is attached hereto									
OR	<u></u>		٦						
was filed on (MM/DD/)	m) [∫ as Unit	ed States App	plication Number	r or PCT Inf	ternational		
Application Number	pplication Number and was amended on (MM/DD/YYYY) (If a					ipplicable).			
I hereby state that I have reviewed and understand the contents of the above Identified specification, including the claims, as									
amended by any amendment specifically referred to above.									
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continuation-in-part application and the national or PCT interest.	ins, material infi national filing da	ormation which bed te of the continuation	came availe on-in-part a	able between pplication,	the filing date o	of the prior	application		
I hereby claim foreign priorit	y benefits unde	r 35 U.S.C. 119(a))-(d) or (f),	or 365(b) of	any foreign app	plication(s)	for patent,		
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Prior Foreign Application		Foreign Filing		Prior			Attached?		
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.									

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This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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NAME OF SOLE OR FIRST INVENTOR:	A petition has been	Name Sty	LAUB	
(first and middle [if eny]) keventor's Signature			7/10/03 USA	
Building Evengreen	30805 C-	COUNTY	Cidenship	
Matting Address 33468 Blue Be EVERGREEN	_ CO	ze 80439	country USA	
NAME OF SECOND INVENTOR:	A petition has been		ed inventor	
Given Name (first and middle (if anyl))	Family or Sun			
Signature Signature		Country	Date Citizonship	
Residence: City	State			_
Mailing Address City	State	ZIP	Country	_
Additional inventors are being named on thes	upplemental Additional Im-	/entor(s) sheet(s) PTOR	DOWN CONTRACTOR	-

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